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|---|------------|---|------------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2005</b><br><small>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</small>   |            | Docket Number (Optional):<br><b>16869G-088000US</b> |                  |
| Application Number: <b>10/671,806</b>   |            | Filed: <b>September 26, 2003</b>                    |                  |
| For: <b>RECORDING CURRENT CONTROL METHOD AND MAGNETIC DISK DRIVE</b>  |            |   |                  |
| Art Unit: <b>2651</b>   |            | Examiner: <b>Natalia Figueroa</b>                   |                  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.<br>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): |            |   |                  |
|   | <u>Fee</u> | <u>Small Entity Fee</u>                             |                  |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$120      | \$60  | \$ <u>120.00</u> |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$450      | \$225   | \$ _____         |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$1020     | \$510   | \$ _____         |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1590     | \$795   | \$ _____         |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2160     | \$1080  | \$ _____         |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.   |            |   |                  |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |            |   |                  |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |            |   |                  |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |            |   |                  |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u> . I have enclosed a duplicate copy of this sheet.                     |            |   |                  |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>   |            |   |                  |
| I am the <input type="checkbox"/> applicant/inventor.   |            |   |                  |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  |            |   |                  |
| <input type="checkbox"/> attorney or agent of record. Registration Number _____   |            |   |                  |
| <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 <u>41,405</u>   |            |   |                  |
| <br>_____<br>Signature   |            | _____<br>March 16, 2005<br>Date                     |                  |
| <b>Chun-Pok Leung, Reg. No. 41,405</b><br>_____<br>Typed or printed name  |            | <b>650-326-2400</b><br>_____<br>Telephone Number    |                  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |            |   |                  |
| <input checked="" type="checkbox"/> Total of <u>2</u> forms are submitted.  |            |   |                  |